	JUL 3 1 2007 2 BICHARD W. WIEKING CLERK, U.S. DISTRICT COURT NORTHERN DISTRICT OF CALIFOFNIA OAKLAND 4		
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•	UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA		
10	James Williamson 30		
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12	, Chibbino.		
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15	(PR)		
16	I, James B. W. (//////////////////////////////////		
17	plaintiff in the above entitled case and that the information I offer throughout this application		
18	is true and correct. I offer this application in support of my request to proceed without being		
19	required to prepay the full amount of fees, costs or give security. I state that because of my		
20	poverty I am unable to pay the costs of this action or give security, and that I believe that I am		
21	entitled to relief.		
22	In support of this application, I provide the following information:		
23	1. Are you presently employed? Yes No		
24	If your answer is "yes," state both your gross and net salary or wages per month, and give the		
25	name and address of your employer:		
26	Gross: Net:		
27	Employer:		
28			
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1	If the answ	er is "no," state the date of last employmen	at and the amount of the gross and net		
2	salary and v	wages per month which you received. (If	you are imprisoned, specify the last		
3	place of em	ployment prior to imprisonment.)			
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7	2. Hav	e you received, within the past twelve (12)	months, any money from any of the		
8	following so	ources:			
9	a.	Business, Profession or	Yes No		
10		self employment			
11	ъ.	Income from stocks, bonds,	Yes No		
12		or royalties?			
١3	c.	Rent payments?	Yes No		
14	d.	Pensions, annuities, or	Yes No		
15		life insurance payments?			
16	e.	Federal or State welfare payments,	Yes No		
7		Social Security or other govern-			
8		ment source?			
9	If the answe	r is "yes" to any of the above, describe each	h source of money and state the amount		
0	received from	m each.			
21					
2					
3	3. Are	you married?	Yes No		
4	Spouse's Ful	ll Name:			
5	Spouse's Pla	ce of Employment:			
6	Spouse's Monthly Salary, Wages or Income:				
7	Gross \$	Net \$			
8	4. a.	List amount you contribute to your spor	use's support:\$		
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. 1	b. List the persons other than your spouse who are dependent upon you for
2	support and indicate how much you contribute toward their support. (NOTE:
3	For minor children, list only their initials and ages. DO NOT INCLUDE
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7	5. Do you own or are you buying a home? Yes No
8	Estimated Market Value: \$ Amount of Mortgage: \$
9	6. Do you own an automobile?
10	Make Year Model
11	Is it financed? Yes No If so, Total due: \$
12	Monthly Payment: \$
13	7. Do you have a bank account? Yes No (Do not include account numbers.)
14	Name(s) and address(es) of bank:
15	
16	Present balance(s): \$
17	Do you own any cash? Yes No Amount: \$
18	Do you have any other assets? (If "yes," provide a description of each asset and its estimated
19	market value.) Yes No
20	
21	8. What are your monthly expenses?
22	Rent: \$ Utilities: O
23	Food: \$ 4500 per Mp. (When Possible) Clothing:
24	Charge Accounts: — 0 —
25	Name of Account Monthly Payment Total Owed on This Acct.
26	\$ \$
27	\$\$\$
28	\$\$9. Do
). Do

	you have any other debts? (List current obligations, indicating amounts and to whom they are
	payable. Do not include account numbers.)
	3
•	4
:	10. Does the complaint which you are seeking to file raise claims that have been presented
6	in other lawsuits? Yes No
7	Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
8	which they were filed.
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10	
11	I consent to prison officials withdrawing from my trust account and paying to the court
12	the initial partial filing fee and all installment payments required by the court.
13	I declare under the penalty of perjury that the foregoing is true and correct and
14	understand that a false statement herein may result in the dismissal of my claims.
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16	7/13/08 mas 4////
.17	DATE SIGNATURE OF APPLICANT
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